

(REFERENCE COPY - Not for submission)

Request to Extend a DTV Engineering STA Application

File Number: 0000116315 Submit Date: 06/18/2020 Call Sign: WQAD-TV Facility ID: 73319 FRN: 0028358455

State: Illinois | City: MOLINE

Service: DTV Purpose: STA Extension Status: Granted Status Date: 08/03/2020 Expiration Date: 01/11/2021

Filing Status: InActive

General Information

Section	Question	Response

Fees, Waivers, and Exemptions

Section	Question	Response
Fees	Is the applicant exempt from FCC application Fees?	No
	Indicate reason for fee exemption:	
Waivers	Does this filing request a waiver of the Commission's rule(s)?	No
	Total number of rule sections involved in this waiver request:	

Application Type	Fee Code	Fee Amount
STA Extension	MGT	\$200.00
	Total	\$200.00

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
TEGNA BROADCAST HOLDINGS, LLC Doing Business As: TEGNA BROADCAST HOLDINGS, LLC	Denise A. Branson, Sr. Paralegal 8350 BROAD STREET SUITE 2000 TYSONS, VA 22102 United States	+1 (703) 873-6606	DBRANSON@TEGNA.	Limited Liability Company

Authorization Holder Name

Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

Contact Representatives (2)

Contact Name	Address	Phone	Email	Contact Type
Michael Beder , Esq . Associate General Counsel TEGNA Inc.	8350 Broad Street, Suite 2000 Tysons, VA 22102 United States	+1 (703) 873- 6902	mbeder@TEGNA.com	Legal Representative
William T. Godfrey , Jr . Consulting Engineers Kessler and Gehman Associates, Inc.	William T. Godfrey, Jr. Kessler and Gehman Associates, Inc. 507-D NW 60th Street Gainesville, FL 32607 United States	+1 (352) 332- 3157	bill@kesslerandgehman. com	Technical Representative

Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	73319
	State	Illinois
	City	MOLINE
	DTV Channel	31
	Designated Market Area	Davenport-R.Island-Moline
Facility Type	Facility Type	Commercial
	Station Type	Main
Zone	Zone	1

Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1225582
Coordinates (NAD83)	Latitude	41° 18' 44.5" N+
	Longitude	090° 22' 46.2" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	334.1 meters
	Support Structure Height	334.1 meters
	Ground Elevation (AMSL)	229.5 meters
Antenna Data	Height of Radiation Center Above Ground Level	283.5 meters
	Height of Radiation Center Above Average Terrain	288.2 meters
	Height of Radiation Center Above Mean Sea Level	513.0 meters
	Effective Radiated Power	955 kW

Antenna Technical Data

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1006152
Antenna Manufacturer and	Manufacturer:	Dielectric
Model	Model	TFU-16WB-R C160
	Rotation	0 degrees
	Electrical Beam Tilt	0.55
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
DTV and DTS: Elevation Pattern	Does the proposed antenna propose elevation radiation patterns that vary with azimuth for reasons other than the use of mechanical beam tilt?	No
	Uploaded file for elevation antenna (or radiation) pattern data	

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	0.891	90	0.657	180	0.346	270	0.994
10	0.952	100	0.514	190	0.373	280	0.988
20	0.992	110	0.375	200	0.514	290	0.949
30	0.998	120	0.349	210	0.658	300	0.889
40	0.972	130	0.458	220	0.763	310	0.828
50	0.929	140	0.575	230	0.830	320	0.785
60	0.881	150	0.621	240	0.879	330	0.771
70	0.830	160	0.574	250	0.926	340	0.786
80	0.762	170	0.455	260	0.968	350	0.829

Additional Azimuths

Degree	$V_{\mathbf{A}}$
275	0.995
25	1.000
183	0.336
117	0.338

Certification

Section	Question	Response
General Certification Statements	The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act of 1934, as amended.).	
	The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR §1.2002(b), for the definition of "party to the application" as used in this certification §1.2002 (c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	
Authorized Party to Sign	FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §503).	
	I certify that this application includes all required and relevant attachments.	Yes
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	Akin S. Harrison , Esq Secretary 06/18/2020

Attachments

File Name	Uploaded By	Attachment Type	Description
WQAD Request for STA Extension (6-18-2020).pdf	Applicant	General Information	STA Extension Request